

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number Q86678 Confirmation Number 1578	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ Signature _____ Typed or printed name _____		In re Application of Emmanuel MIETTE	
		Application Number 10/529,755	
		Filed March 30, 2005	
		For METHOD OF PROCESSING POSTAL ITEMS WITH ACCOUNT BEING TAKEN OF EXTRA EXPENSE DUE TO WRONG DELIVERY	
Art Unit 3628		Examiner Brian M. Epstein	

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

There fee for this Notice of Appeal \$540

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____

☐ Payment by credit card.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The USPTO is directed and authorized to charge all required fees, except for the Issue Fee and the Publication Fee, to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

CORRESPONDENCE ADDRESS

Direct all correspondence to the address for SUGHRUE MION, PLLC filed under the Customer Number listed below:

WASHINGTON OFFICE
23373
CUSTOMER NUMBER

I am the

<input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. <input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number 28,703 <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____	_____ /DJCushing/ Signature David J. Cushing _____ Typed or printed name (202) 293-7060 _____ Telephone number March 3, 2011 _____ Date
--	--

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 form is submitted.